



Hospital Fiscal Report

State Form 49520 (R2 /7-02)

(Form approved by State Board of Accounts, 2000)

I. Identification of Organization

Hospital Name: GOOD SAMARITAN HOSPITAL

City of Hospital: Vincennes

Year Begin: 01/01/2012 (mm/dd/yyyy format)

Year End: 12/31/2012 (mm/dd/yyyy format)

Medicare Provider Number: 15-0042

Statement One: Summary of Revenue and Expenses

1. Gross Patient Service Revenue

Inpatient Patient Service Revenue	\$150943218
Outpatient Patient Service Revenue	\$266883285
Total Gross Patient Service Revenue	\$417826503

2. Deductions From Revenue

Contractual Allowance	\$185851114
Other Deductions	\$43350133
Total Deductions	\$229201247

3. Total Operating Revenue

Net Patient Service Revenue	\$188625255
Other Operating Revenue	\$11476957
Total Operating Revenue	\$200102212

4. Operating Expenses

Salaries and Wages	\$83023474	Employee Benefits	\$23403928
Depreciation and Amortization	\$9470210	Interest Expense	\$329670
Bad Debt	\$18394580	Other Expenses	\$60689998
Total Operating Expenses	\$195311860		

5. Net Revenue and Expenses

Excess Revenue over Expenses	\$4790352	Total Assets	\$289437770
Net Non-operating Gains over Loss	\$8571504	Total Liabilities	\$105728124
Total Net Gains	\$13361856		

Statement Two: Contractual Allowance

Revenue Source	Gross Patient Revenue	Contractual Allowance	Net Patient Service Allowance
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Medicare	\$192874750	\$105802607	\$87072143
Medicaid	\$52470199	\$28782844	\$23687355
Other Government	\$2388080	\$1309996	\$1078084
Other State	\$303217	\$166332	\$136885
Other Payers	\$169790257	\$93139469	\$76650788
Total	\$417826503	\$229201248	\$188625255

Statement Three: Donations Statement

	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Donations	\$1173303	\$45036	\$1128267

Statement Four: Research Statement

	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Research	\$57481	\$71348	\$-13867

Statement Five: Education Statement

Education of	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Medical Professionals	\$77271	\$412376	\$-335105
Hospital Patients	\$0	\$7951	\$-7951
Community Education	\$0	\$269344	\$-269344

Number of Medical Professionals Trained	469
Number of Hospital Patients Educated	465576
Number of Citizens Exposed to Health Education Messages	30955

Statement Six: Charity Statement

Hospital Charity Charges	\$14868902
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	Payments from Clients	Less Costs to Hospital	Unreimbursed Costs to Hospital
Charity Care	\$0	\$5828609	
HCI Payments	\$0		
Subtotal	\$0	\$5828609	\$-5828609
Medicaid Shortfalls	\$10161300	\$20470800	
Subtotal	\$10161300	\$26299409	\$-16138109
DSH Payments	\$3,831,732		
Subtotal	\$13993032	\$26299409	\$-12306377
Medicare Shortfalls	\$61886122	\$76087862	
Other Government Programs	\$0	\$0	
Total	\$75879154	\$102387271	\$-26508117

Statement Seven: Subsidized Health Services for the Community

	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Community Programs	\$-71493	\$544126	\$-615619
Community Assessment	\$0	\$0	\$0
Provision of Taxes	\$0	\$3824	\$-3824
Other Allocations	\$42351	\$251243	\$-208892